

B1 (Official Form 1)(04/13)

<b>United States Bankruptcy Court</b> <b>Northern District of Illinois</b>		<b>Voluntary Petition</b>
Name of Debtor (if individual, enter Last, First, Middle): <b>DAOUD, OSAMA T.</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>BRONICKA, KATARZYNA</b>
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>AKA Osama Daoud; AKA Sam T. Daoud; AKA Sam Daoud; FDBA A Domani Limo Service</b>		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) <b>xxx-xx-9008</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>xxx-xx-6709</b>
Street Address of Debtor (No. and Street, City, and State): <b>2105 Brittany Ct. Glendale Heights, IL</b> <div style="text-align: right; font-size: small;">ZIP Code <b>60139</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <b>2105 Brittany Ct. Glendale Heights, IL</b> <div style="text-align: right; font-size: small;">ZIP Code <b>60139</b></div>
County of Residence or of the Principal Place of Business: <b>DuPage</b>		County of Residence or of the Principal Place of Business: <b>DuPage</b>
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
<b>Type of Debtor</b> (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b> *** <b>Gregory D. Bruno</b> *** <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>DAOUD, OSAMA T.</b> <b>BRONICKA, KATARZYNA</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>- None -</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>- None -</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).  <div style="display: flex; justify-content: space-between;"> <div> <b>X /s/ Gregory D. Bruno</b>                      Signature of Attorney for Debtor(s)  <b>Gregory D. Bruno</b> </div> <div style="text-align: right;"> <b>December 31, 2014</b>                      (Date)                 </div> </div>	
<b>Exhibit C</b>			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="margin-left: 40px;">                 _____                  (Name of landlord that obtained judgment)             </div>  <div style="margin-left: 40px;">                 _____                  (Address of landlord)             </div>			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

## Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**DAOUD, OSAMA T.  
BRONICKA, KATARZYNA**

### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ OSAMA T. DAOUD**

Signature of Debtor **OSAMA T. DAOUD**

**X /s/ KATARZYNA BRONICKA**

Signature of Joint Debtor **KATARZYNA BRONICKA**

Telephone Number (If not represented by attorney)

**December 31, 2014**

Date

#### Signature of Attorney\*

**X /s/ Gregory D. Bruno**

Signature of Attorney for Debtor(s)

**Gregory D. Bruno**

Printed Name of Attorney for Debtor(s)

**Law Offices of Gregory D. Bruno**

Firm Name

**1807 N. Broadway  
Melrose Park, IL 60160**

Address

**(708) 343-4544 Fax: (708) 343-4670**

Telephone Number

**December 31, 2014**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.*

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re **OSAMA T. DAOUD  
KATARZYNA BRONICKA**

Debtor(s)

Case No.  
Chapter

**7**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ OSAMA T. DAOUD  
OSAMA T. DAOUD

Date: December 31, 2014

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re **OSAMA T. DAOUD  
KATARZYNA BRONICKA**

Debtor(s)

Case No.  
Chapter

**7**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ KATARZYNA BRONICKA  
KATARZYNA BRONICKA

Date: December 31, 2014

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **OSAMA T. DAOUD,**  
**KATARZYNA BRONICKA**

Debtors

Case No. \_\_\_\_\_

Chapter 7

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>126,630.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>3,308.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>5</b>		<b>196,956.30</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>68</b>		<b>261,897.08</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>2,447.33</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>2,987.33</b>
Total Number of Sheets of ALL Schedules		<b>86</b>			
Total Assets			<b>129,938.00</b>		
Total Liabilities				<b>458,853.38</b>	



**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **OSAMA T. DAOUD,**  
**KATARZYNA BRONICKA**

Debtors

Case No. \_\_\_\_\_

Chapter 7

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>0.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	<b>2,447.33</b>
Average Expenses (from Schedule J, Line 22)	<b>2,987.33</b>
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 )	<b>1,458.88</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>70,326.30</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>0.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>0.00</b>
4. Total from Schedule F		<b>261,897.08</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>332,223.38</b>

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
<b>Two bedroom single-family house located at 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>Debtors are co-owners of record as tenants by the entirety</b>	<b>J</b>	<b>126,630.00</b>	<b>196,956.30</b>

Sub-Total > **126,630.00** (Total of this page)

Total > **126,630.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		<b>Cash on hand Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>J</b>	<b>100.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Checking account PNC Bank, Norridge, Illinois</b>	<b>J</b>	<b>200.00</b>
		<b>Checking account PNC Bank, Norridge, Illinois</b>	<b>W</b>	<b>30.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>TV's, VCR, DVD player, stereo, bedroom sets, sofa &amp; matching chair, end tables, kitchen table &amp; chairs, cookware, small appliances, stove, refrigerator, microwave, washer, dryer, computer (2) and printer, cell phones Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>J</b>	<b>750.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>Misc. items of adult man's and adult woman's and childrens' clothing Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>J</b>	<b>1,000.00</b>
7. Furs and jewelry.		<b>Misc. items of man's and woman's jewelry, to wit: wedding rings, earrings, necklaces, bracelets, costume jewelry items, watches Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>J</b>	<b>200.00</b>

Sub-Total > **2,280.00**  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		<b>Income tax refund for tax year ending 12/31/2014 Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>J</b>	<b>Unknown</b>
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			

Sub-Total > **0.00**  
(Total of this page)

Sheet 1 of 3 continuation sheets attached  
to the Schedule of Personal Property

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>2005 Mazda 3 automobile; 285,000 miles; fair condition Location: 2105 Brittany Ct., Glendale Heights IL 60139</b>	<b>W</b>	<b>1,028.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			

Sub-Total > **1,028.00**  
(Total of this page)

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			

Sheet 3 of 3 continuation sheets attached  
to the Schedule of Personal Property

Sub-Total > **0.00**  
(Total of this page)  
Total > **3,308.00**

(Report also on Summary of Schedules)

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>Cash on Hand</b>			
Cash on hand Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(b)	100.00	100.00
<b>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</b>			
Checking account PNC Bank, Norridge, Illinois	735 ILCS 5/12-1001(b)	200.00	200.00
Checking account PNC Bank, Norridge, Illinois	735 ILCS 5/12-1001(b)	30.00	30.00
<b>Household Goods and Furnishings</b>			
TV's, VCR, DVD player, stereo, bedroom sets, sofa & matching chair, end tables, kitchen table & chairs, cookware, small appliances, stove, refrigerator, microwave, washer, dryer, computer (2) and printer, cell phones Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(b)	750.00	750.00
<b>Wearing Apparel</b>			
Misc. items of adult man's and adult woman's and childrens' clothing Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(a)	1,000.00	1,000.00
<b>Furs and Jewelry</b>			
Misc. items of man's and woman's jewelry, to wit: wedding rings, earrings, necklaces, bracelets, costume jewelry items, watches Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(b)	200.00	200.00
<b>Other Liquidated Debts Owning Debtor Including Tax Refund</b>			
Income tax refund for tax year ending 12/31/2014 Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(b)	6,720.00	Unknown
<b>Automobiles, Trucks, Trailers, and Other Vehicles</b>			
2005 Mazda 3 automobile; 285,000 miles; fair condition Location: 2105 Brittany Ct., Glendale Heights IL 60139	735 ILCS 5/12-1001(c)	1,028.00	1,028.00

Total: **10,028.00** **3,308.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. <b>1563061219626</b>			<b>Opened 3/15/06 Last Active 8/15/12</b>					
<b>Chase</b> <b>Po Box 24696</b> <b>Columbus, OH 43224</b>		<b>W</b>	<b>old mortgage loan of record</b>					
			Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>4097911401</b>			<b>Opened 9/11/07 Last Active 9/01/07</b>					
<b>Citi Auto</b> <b>2208 Highway 121 Ste 100</b> <b>Bedford, TX 76021</b>		<b>-</b>	<b>old auto loan of record</b>					
			Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>4097911401</b>			<b>Opened 9/11/07 Last Active 9/01/07</b>					
<b>Citi Auto</b> <b>2208 Highway 121 Ste 100</b> <b>Bedford, TX 76021</b>		<b>H</b>	<b>old auto loan of record</b>					
			Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>0630070039-7</b>			<b>Opened 4/03/06 Last Active 10/01/12</b>					
<b>Citi Mortgage Inc</b> <b>Citibank, N.A.</b> <b>PO Box 9438</b> <b>Gaithersburg, MD 20898</b>		<b>W</b>	<b>second mortgage/home equity line of credit</b> <b>Two bedroom single-family house</b> <b>located at 2105 Brittany Ct., Glendale</b> <b>Heights IL 60139</b>					
			Value \$ <b>126,630.00</b>				<b>39,532.30</b>	<b>30,794.30</b>
Subtotal							<b>39,532.30</b>	<b>30,794.30</b>
(Total of this page)								

4 continuation sheets attached



B6D (Official Form 6D) (12/07) - Cont.

In re **OSAMA T. DAUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No.								
<b>American Coradius International LLC 2420 Sweet Home Road, Ste. 150 Amherst, NY 14228</b>			<b>Representing: Citi Mortgage Inc</b>				<b>Notice Only</b>	
			Value \$					
Account No.								
<b>NCC Business Services, Inc. 9428 Baymeadows Road, Ste. 200 Jacksonville, FL 32256</b>			<b>Representing: Citi Mortgage Inc</b>				<b>Notice Only</b>	
			Value \$					
Account No.								
<b>NCC Business Services, Inc. PO Box 23758 Jacksonville, FL 32241</b>			<b>Representing: Citi Mortgage Inc</b>				<b>Notice Only</b>	
			Value \$					
Account No.								
<b>Real Time Resolutions, Inc. 1750 Regal Row, Ste. N Dallas, TX 75235</b>			<b>Representing: Citi Mortgage Inc</b>				<b>Notice Only</b>	
			Value \$					
Account No.								
<b>Real Time Resolutions, Inc. 1349 Empire Central Drive, Ste. 150 Dallas, TX 75247</b>			<b>Representing: Citi Mortgage Inc</b>				<b>Notice Only</b>	
			Value \$					
Subtotal (Total of this page)							<b>0.00</b>	<b>0.00</b>

Sheet 1 of 4 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No. <b>35060101003842</b>	W	<b>Opened 10/25/02 Last Active 10/13/05</b>					
<b>Com Bk Lemont 1229 State Street Lemont, IL 60439</b>		<b>old auto loan of record</b>					
		Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>6470033065657</b>	W	<b>Opened 3/15/06 Last Active 4/10/13</b>					
<b>Homeward Residential 1525 S Belt Line Rd Coppell, TX 75019</b>		<b>old mortgage loan of record</b>					
		Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>38391756</b>	-	<b>Opened 1/03/05 Last Active 1/20/10</b>					
<b>Mazda Amer Cr 9009 Caruthers Pkwy Franklin, TN 37067</b>		<b>old auto loan of record</b>					
		Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>38391756</b>	J	<b>Opened 1/03/05 Last Active 1/20/10</b>					
<b>Mazda Amer Cr 9009 Caruthers Pkwy Franklin, TN 37067</b>		<b>old auto loan of record</b>					
		Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>7146182451</b>	W	<b>Opened 3/15/06 Last Active 10/13/14</b>					
<b>Ocwen Loan Servicing LLC 12650 Ingenuity Drive Orlando, FL 32826</b>		<b>first mortgage</b>					
		<b>Two bedroom single-family house located at 2105 Brittany Ct., Glendale Heights IL 60139</b>					
		Value \$ <b>126,630.00</b>				<b>117,892.00</b>	<b>0.00</b>
Subtotal						<b>117,892.00</b>	<b>0.00</b>
(Total of this page)						<b>117,892.00</b>	<b>0.00</b>

Sheet **2** of **4** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No. <b>7146182451</b>			<b>Opened 3/15/06 Last Active 11/06/13</b>					
<b>Ocwen Loan Servicing LLC</b> <b>3451 Hammond Ave</b> <b>Waterloo, IA 50702</b>		<b>W</b>	<b>old mortgage loan of record</b>					
			Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No. <b>630070039</b>			<b>on or about 2012 - 2014</b>					
<b>Real Time Resolutions, Inc.</b> <b>1349 Empire Central Drive, Ste. 150</b> <b>Dallas, TX 75247</b>		<b>J</b>	<b>second mortgage/home equity line of credit</b> <b>Two bedroom single-family house</b> <b>located at 2105 Brittany Ct., Glendale</b> <b>Heights IL 60139</b>					
			Value \$ <b>126,630.00</b>				<b>39,532.00</b>	<b>39,532.00</b>
Account No.								
<b>Real Time Resolutions, Inc.</b> <b>1750 Regal Row, Ste. N</b> <b>Dallas, TX 75235</b>			<b>Representing:</b> <b>Real Time Resolutions, Inc.</b>				<b>Notice Only</b>	
			Value \$					
Account No. <b>3000016705551000</b>			<b>Opened 9/25/07 Last Active 6/01/09</b>					
<b>Santander Consumer USA</b> <b>8585 N Stemmons Fwy Ste</b> <b>Dallas, TX 75247</b>		<b>-</b>	<b>old auto loan of record</b>					
			Value \$ <b>Unknown</b>				<b>0.00</b>	<b>Unknown</b>
Account No.								
<b>Jefferson Capital Systems</b> <b>16 Mclelland Road</b> <b>Saint Cloud, MN 56303</b>			<b>Representing:</b> <b>Santander Consumer USA</b>				<b>Notice Only</b>	
			Value \$					
Subtotal							<b>39,532.00</b>	<b>39,532.00</b>
(Total of this page)								

Sheet **3** of **4** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No. <b>3000016705551000</b>		H	<b>Opened 9/25/07 Last Active 9/26/12</b>				<b>0.00</b>	<b>Unknown</b>
<b>Santander Consumer USA</b> <b>PO Box 961245</b> <b>Ft Worth, TX 76161</b>			<b>old auto loan of record</b>					
			Value \$ <b>Unknown</b>					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					

Sheet **4** of **4** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

Subtotal  
(Total of this page)

**0.00**

**0.00**

Total  
(Report on Summary of Schedules)

**196,956.30**

**70,326.30**

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R  H U S B A N D W I F E J O I N T C O M M U N I T Y	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>9215</b>  <b>1st Family Dental of Arlington Hts</b> <b>1235 N. Rand Road</b> <b>Arlington Heights, IL 60004</b>	<b>J</b>	<b>on or about 2009 - 2011</b> <b>Dental services</b>				<b>902.82</b>
Account No.  <b>Robert R. Mucci</b> <b>Attorney at Law</b> <b>PO Box 190</b> <b>West Chicago, IL 60186</b>		<b>Representing:</b> <b>1st Family Dental of Arlington Hts</b>				<b>Notice Only</b>
Account No.  <b>Acute Care Specialists II, Ltd.</b> <b>701 Winthrop Avenue</b> <b>Glendale Heights, IL 60139</b>	<b>J</b>	<b>on or about 2009</b> <b>Medical services</b>				<b>953.00</b>
Account No.  <b>Acute Care Specialists II, Ltd.</b> <b>PO Box 366</b> <b>Hinsdale, IL 60522</b>		<b>Representing:</b> <b>Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Subtotal (Total of this page)						<b>1,855.82</b>

67 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No. <b>001 6759</b>		<b>on or about 2010 Medical services</b>				
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>760.00</b>
Sheet no. <u>1</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>760.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <u>2</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>0.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>on or about 2008 - 2009 Medical services</b>				
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>411.00</b>
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <b>3</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>411.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.		<b>on or about 2008 - 2009 Medical services</b>				
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>120.00</b>
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <b>4</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>120.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No. <b>001 6759</b>		<b>on or about 2010 Medical services</b>				
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>800.00</b>
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <b>5</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>800.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>	<b>on or about 2009 - 2011 Medical services</b>				<b>40.00</b>
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <u>6</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>40.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No. <b>various</b>		<b>on or about various dates Medical services</b>				
<b>Acute Care Specialists II, Ltd. 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>Unknown</b>
Sheet no. <u>7</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Acute Care Specialists II, Ltd. PO Box 366 Hinsdale, IL 60522</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Acute Care Specialists II, Ltd. 75 Remittance Drive, Ste. 1583 Chicago, IL 60675</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Creditors Collection Bureau, Inc. PO Box 63 151 N. Schuyler Avenue Kankakee, IL 60901</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Acute Care Specialists II, Ltd.</b>				<b>Notice Only</b>
Sheet no. <u>8</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 2101638	J		on or about 2010 Medical services				2,229.84
Adventist GlenOaks Hospital 701 Winthrop Avenue Glendale Heights, IL 60139							
Account No.			Representing: Adventist GlenOaks Hospital				Notice Only
Adventist GlenOaks Hospital 33850 Treasury Center Chicago, IL 60694							
Account No.			Representing: Adventist GlenOaks Hospital				Notice Only
Adventist GlenOaks Hospital 75 Remittance Drive, Ste. 3125 Chicago, IL 60675							
Account No.			Representing: Adventist GlenOaks Hospital				Notice Only
Law Offices of Neil J. Greene, LLC 250 Parkway Drive, Ste. 280 Lincolnshire, IL 60069							
Account No.			Representing: Adventist GlenOaks Hospital				Notice Only
Medical Services of Chattanooga Inc 2810 Walker Road Chattanooga, TN 37421							

Sheet no. 9 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page)

2,229.84

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>			<b>Representing: Adventist GlenOaks Hospital</b>			<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>			<b>Representing: Adventist GlenOaks Hospital</b>			<b>Notice Only</b>
Account No.						
<b>Adventist GlenOaks Hospital 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>	<b>on or about 2010 Medical services</b>				<b>900.00</b>
Account No.						
<b>Adventist GlenOaks Hospital 33850 Treasury Center Chicago, IL 60694</b>			<b>Representing: Adventist GlenOaks Hospital</b>			<b>Notice Only</b>
Account No.						
<b>Adventist GlenOaks Hospital 75 Remittance Drive, Ste. 3125 Chicago, IL 60675</b>			<b>Representing: Adventist GlenOaks Hospital</b>			<b>Notice Only</b>
Sheet no. <u>10</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>900.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.  <b>Law Offices of Neil J. Greene, LLC</b> <b>250 Parkway Drive, Ste. 280</b> <b>Lincolnshire, IL 60069</b>		<b>Representing:</b> <b>Adventist GlenOaks Hospital</b>				<b>Notice Only</b>	
Account No.  <b>Medical Services of Chattanooga Inc</b> <b>2810 Walker Road</b> <b>Chattanooga, TN 37421</b>		<b>Representing:</b> <b>Adventist GlenOaks Hospital</b>				<b>Notice Only</b>	
Account No.  <b>Merchants Credit Guide Company</b> <b>223 W. Jackson Blvd., Ste. 4</b> <b>Chicago, IL 60606</b>		<b>Representing:</b> <b>Adventist GlenOaks Hospital</b>				<b>Notice Only</b>	
Account No.  <b>Merchants' Credit Guide Company</b> <b>223 W. Jackson Blvd., #700</b> <b>Chicago, IL 60606</b>		<b>Representing:</b> <b>Adventist GlenOaks Hospital</b>				<b>Notice Only</b>	
Account No. <b>354989008</b>  <b>Adventist GlenOaks Hospital</b> <b>701 Winthrop Avenue</b> <b>Glendale Heights, IL 60139</b>	<b>J</b>	<b>on or about 2010</b> <b>Medical services</b>				<b>5,149.84</b>	
Sheet no. <u>11</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>5,149.84</b>	

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In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Adventist GlenOaks Hospital 33850 Treasury Center Chicago, IL 60694</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Adventist GlenOaks Hospital 75 Remittance Drive, Ste. 3125 Chicago, IL 60675</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Law Offices of Neil J. Greene, LLC 250 Parkway Drive, Ste. 280 Lincolnshire, IL 60069</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Medical Services of Chattanooga Inc 2810 Walker Road Chattanooga, TN 37421</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Sheet no. <u>12</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No. <b>various</b>		<b>on or about various dates Medical services</b>				
<b>Adventist GlenOaks Hospital 701 Winthrop Avenue Glendale Heights, IL 60139</b>	<b>J</b>					<b>Unknown</b>
Account No.						
<b>Adventist GlenOaks Hospital 33850 Treasury Center Chicago, IL 60694</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Adventist GlenOaks Hospital 75 Remittance Drive, Ste. 3125 Chicago, IL 60675</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Law Offices of Neil J. Greene, LLC 250 Parkway Drive, Ste. 280 Lincolnshire, IL 60069</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Sheet no. <u>13</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Medical Services of Chattanooga Inc 2810 Walker Road Chattanooga, TN 37421</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Adventist GlenOaks Hospital</b>				<b>Notice Only</b>
Account No. <b>630 351-1111 923 8</b>		<b>on or about 2008 - 2010 Claim for balance due on telephone service account</b>				<b>369.77</b>
<b>AT&amp;T 32 Avenue of the Americas New York, NY 10013</b>	<b>J</b>					
Account No.						
<b>Alliant Law Group, P.C. PO Box 468569 Atlanta, GA 31146</b>		<b>Representing: AT&amp;T</b>				<b>Notice Only</b>
Sheet no. <u>14</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>369.77</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAUD,**  
**KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>AT&amp;T</b> <b>PO Box 5080</b> <b>Carol Stream, IL 60197</b>		<b>Representing:</b> <b>AT&amp;T</b>				<b>Notice Only</b>
Account No.						
<b>AT&amp;T</b> <b>Payment Processing Center - 27</b> <b>PO Box 55126</b> <b>Boston, MA 02205</b>		<b>Representing:</b> <b>AT&amp;T</b>				<b>Notice Only</b>
Account No. <b>232043187400</b>		<b>on or about 2012 - 2014</b> <b>Claim for balance due on telephone service</b> <b>account</b>				<b>1,678.08</b>
<b>AT&amp;T Mobility</b> <b>PO Box 6416</b> <b>Carol Stream, IL 60197</b>	<b>J</b>					
Account No.						
<b>AT&amp;T</b> <b>32 Avenue of the Americas</b> <b>New York, NY 10013</b>		<b>Representing:</b> <b>AT&amp;T Mobility</b>				<b>Notice Only</b>
Account No.						
<b>AT&amp;T</b> <b>PO Box 5080</b> <b>Carol Stream, IL 60197</b>		<b>Representing:</b> <b>AT&amp;T Mobility</b>				<b>Notice Only</b>
Sheet no. <u>15</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,678.08</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>AT&amp;T Payment Processing Center - 27 PO Box 55126 Boston, MA 02205</b>		<b>Representing: AT&amp;T Mobility</b>				<b>Notice Only</b>
Account No.						
<b>AT&amp;T Mobility c/o Afni, Inc. P.O. Box 3427 Bloomington, IL 61702</b>		<b>Representing: AT&amp;T Mobility</b>				<b>Notice Only</b>
Account No.						
<b>AT&amp;T Mobility c/o CBCS PO Box 2589 Columbus, OH 43216</b>		<b>Representing: AT&amp;T Mobility</b>				<b>Notice Only</b>
Account No.						
<b>Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735</b>		<b>Representing: AT&amp;T Mobility</b>				<b>Notice Only</b>
Account No. <b>4339930029586700</b>						
<b>Bank of America PO Box 15311 Wilmington, DE 19884</b>		<b>- Opened 1/29/08 Last Active 6/01/09 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>				<b>4,200.00</b>
Sheet no. <u>16</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>4,200.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.  <b>BMO Harris Bank 1335 W. Lake Street Addison, IL 60101</b>	<b>J</b>	<b>on or about October, 2014 Claim for balance of account overdraft</b>				<b>78.00</b>
Account No. <b>5407915008114842</b>  <b>Cap One Po Box 5253 Carol Stream, IL 60197</b>	<b>H</b>	<b>Opened 6/29/03 Last Active 2/13/06 Credit Card</b>				<b>0.00</b>
Account No. <b>5178052161226341</b>  <b>Cap One Na Po Box 26625 Richmond, VA 23261</b>	<b>-</b>	<b>Opened 3/11/02 Last Active 3/28/05 Credit account</b>				<b>0.00</b>
Account No. <b>5178052161226341</b>  <b>Cap One Na Po Box 26625 Richmond, VA 23261</b>	<b>H</b>	<b>Opened 3/11/02 Last Active 3/28/05 Credit Card</b>				<b>0.00</b>
Account No. <b>5178057314763272</b>  <b>Capital One Bank (USA), N.A. PO Box 85520 Richmond, VA 23285</b>	<b>W</b>	<b>Opened 11/10/07 Last Active 1/01/13 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>				<b>6,179.00</b>
Sheet no. <u>17</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>6,257.00</b>
Subtotal (Total of this page)						<b>6,257.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Freedman Anselmo Lindberg LLC 1807 W. Diehl Road, Ste. 333 P.O. Box 3228 Naperville, IL 60566</b>		<b>Representing: Capital One Bank (USA), N.A.</b>				<b>Notice Only</b>
Account No.						
<b>Freedman Anselmo Lindberg LLC 1771 W. Diehl Road, Ste. 150 PO Box 3228 Naperville, IL 60566</b>		<b>Representing: Capital One Bank (USA), N.A.</b>				<b>Notice Only</b>
Account No.						
<b>United Recovery Systems, LP P.O. Box 722929 Houston, TX 77272</b>		<b>Representing: Capital One Bank (USA), N.A.</b>				<b>Notice Only</b>
Account No.						
<b>United Recovery Systems, LP P.O. Box 722910 Houston, TX 77272</b>		<b>Representing: Capital One Bank (USA), N.A.</b>				<b>Notice Only</b>
Account No.						
<b>Capital One Bank (USA), N.A. P.O. Box 85520 Richmond, VA 23285</b>		<b>J on or about 6/9/2014 Judgment entered against Debtor wife for monies owed, plus court costs, atty's fees and statutory interest, in lawsuit filed in Circuit Court of Du Page County, Illinois, Case No. 2014-SR-000832</b>				<b>5,683.45</b>
Sheet no. <u>18</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>5,683.45</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Freedman Anselmo Lindberg LLC 1807 W. Diehl Road, Ste. 333 P.O. Box 3228 Naperville, IL 60566</b>			<b>Representing: Capital One Bank (USA), N.A.</b>			<b>Notice Only</b>
Account No.						
<b>Freedman Anselmo Lindberg LLC 1771 W. Diehl Road, Ste. 150 PO Box 3228 Naperville, IL 60566</b>			<b>Representing: Capital One Bank (USA), N.A.</b>			<b>Notice Only</b>
Account No.						
<b>United Recovery Systems, LP P.O. Box 722929 Houston, TX 77272</b>			<b>Representing: Capital One Bank (USA), N.A.</b>			<b>Notice Only</b>
Account No.						
<b>United Recovery Systems, LP P.O. Box 722910 Houston, TX 77272</b>			<b>Representing: Capital One Bank (USA), N.A.</b>			<b>Notice Only</b>
Account No. <b>16273744</b>			<b>Opened 2/20/13 Last Active 12/01/08 Collection on account for and/or acquired from GE Money Bank</b>			
<b>Cavalry Portfolio Services, LLC Cavalry SPV II, LLC PO Box 27288 Tempe, AZ 85285</b>		<b>H</b>				<b>295.74</b>
Sheet no. <u>19</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>295.74</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>7714210237300314</b>	<b>J</b>	<b>on or about 2003 - 2014</b>				<b>295.74</b>
<b>Cavalry SPV II, LLC c/o Cavalry Portfolio Services, LLC PO Box 27288 Tempe, AZ 85285</b>		<b>Claim for balance due on account for and/or acquired from GE Money Bank / Sam's Club</b>				
Account No.						<b>Notice Only</b>
<b>Cavalry Investments, LLC 7 Skyline Drive, 3rd Floor Hawthorne, NY 10532</b>		<b>Representing: Cavalry SPV II, LLC</b>				
Account No.						<b>Notice Only</b>
<b>Cavalry Portfolio Service 7 Skyline Drive, Ste. 3 Hawthorne, NY 10532</b>		<b>Representing: Cavalry SPV II, LLC</b>				
Account No.						<b>Notice Only</b>
<b>Cavalry Portfolio Service 500 Summit Lake Drive Valhalla, NY 10595</b>		<b>Representing: Cavalry SPV II, LLC</b>				
Account No.						<b>Notice Only</b>
<b>Cavalry Portfolio Service 500 Summit Lake Drive Valhalla, NY 10595</b>		<b>Representing: Cavalry SPV II, LLC</b>				
Sheet no. <u>20</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>295.74</b>
Subtotal (Total of this page)						

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.  <b>LTD Financial Services, L.P.</b> <b>7322 Southwest Freeway, Ste. 1600</b> <b>Houston, TX 77074</b>		Representing: <b>Cavalry SPV II, LLC</b>						Notice Only
Account No. <b>4266841085739116</b>  <b>Chase</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>		Opened <b>3/07/06</b> Last Active <b>10/22/07</b> <b>Credit account</b>	-					0.00
Account No. <b>4266841022741647</b>  <b>Chase</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>		Opened <b>12/29/04</b> Last Active <b>11/13/07</b> <b>Credit Card</b>	W					0.00
Account No. <b>4266841085739116</b>  <b>Chase</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>		Opened <b>3/07/06</b> Last Active <b>10/22/07</b> <b>Credit Card</b>	H					0.00
Account No. <b>4266841171350984</b>  <b>Chase / Chase Bank USA, N.A.</b> <b>P.O. Box 15298</b> <b>Wilmington, DE 19850</b>		Opened <b>3/26/08</b> Last Active <b>10/01/08</b> <b>Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>	-					7,094.00
Sheet no. <u>21</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								Subtotal (Total of this page) <b>7,094.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 4185866224633670		W	Opened 5/16/05 Last Active 12/01/12 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.				1,053.89	
Chase / Chase Bank USA, N.A. Attn: Bankruptcy Dept. P.O. Box 15298 Wilmington, DE 19850								
Account No.			Representing: Chase / Chase Bank USA, N.A.				Notice Only	
ARS National Services, Inc. P.O. Box 463023 Escondido, CA 92046								
Account No.			Representing: Chase / Chase Bank USA, N.A.				Notice Only	
ARS National Services, Inc. P.O. Box 469047 Escondido, CA 92046								
Account No.			Representing: Chase / Chase Bank USA, N.A.				Notice Only	
MRS Associates of New Jersey MRS Associates, Inc. 1930 Olney Avenue Cherry Hill, NJ 08003								
Account No.			Representing: Chase / Chase Bank USA, N.A.				Notice Only	
United Collection Bureau, Inc. 5620 Southwyck Blvd., Ste. 206 Toledo, OH 43614								
Sheet no. 22 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	1,053.89

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>United Collection Bureau, Inc. PO Box 140310 Toledo, OH 43614</b>		<b>Representing: Chase / Chase Bank USA, N.A.</b>				<b>Notice Only</b>
Account No. <b>5424180684283267</b>		<b>Opened 5/24/07 Last Active 10/16/12 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>				<b>5,511.73</b>
<b>Citi / Citibank, N.A. Citi MasterCard PO Box 6241 Sioux Falls, SD 57117</b>		<b>W</b>				
Account No.						
<b>ARS National Services, Inc. P.O. Box 463023 Escondido, CA 92046</b>		<b>Representing: Citi / Citibank, N.A.</b>				<b>Notice Only</b>
Account No.						
<b>ARS National Services, Inc. P.O. Box 469047 Escondido, CA 92046</b>		<b>Representing: Citi / Citibank, N.A.</b>				<b>Notice Only</b>
Account No.						
<b>Client Services, Inc. 3451 Harry S. Truman Blvd. Saint Charles, MO 63301</b>		<b>Representing: Citi / Citibank, N.A.</b>				<b>Notice Only</b>
Sheet no. <b>23</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>5,511.73</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Estate Information Services, LLC d/b/a EIS Collections PO Box 1730 Reynoldsburg, OH 43068</b>			<b>Representing: Citi / Citibank, N.A.</b>			<b>Notice Only</b>
Account No.						
<b>FMS, Inc. PO Box 707601 Tulsa, OK 74170</b>			<b>Representing: Citi / Citibank, N.A.</b>			<b>Notice Only</b>
Account No. <b>30000167055551000</b>			<b>on or about 2005 - 2014 Claim for balance due on credit account</b>			
<b>Citi-Serv Auto Loan c/o Santander Consumer USA PO Box 961245 Ft. Worth, TX 76161</b>		<b>J</b>				<b>28,320.87</b>
Account No.						
<b>Praxis Financial Solutions, Inc. 7301 N. Lincoln Avenue, Ste. 220 Lincolnwood, IL 60712</b>			<b>Representing: Citi-Serv Auto Loan</b>			<b>Notice Only</b>
Account No.						
<b>Santander Consumer USA 8585 N Stemmons Fwy Ste Dallas, TX 75247</b>			<b>Representing: Citi-Serv Auto Loan</b>			<b>Notice Only</b>
Sheet no. <b>24</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>28,320.87</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Santander Consumer USA Attn: Bankruptcy Dept. P.O. Box 560284 Dallas, TX 75356</b>		<b>Representing: Citi-Serv Auto Loan</b>				<b>Notice Only</b>
Account No.						
<b>Santander Consumer USA PO Box 105255 Atlanta, GA 30348</b>		<b>Representing: Citi-Serv Auto Loan</b>				<b>Notice Only</b>
Account No. <b>56530024</b>		<b>on or about 2009 - 2014 Claim for balance due on account</b>				
<b>City of Chicago Department of Revenue PO Box 88292 Chicago, IL 60680</b>	<b>J</b>					<b>61.00</b>
Account No.						
<b>Linebarger Goggan Blair &amp; Simpson PO Box 06268 Chicago, IL 60606</b>		<b>Representing: City of Chicago</b>				<b>Notice Only</b>
Account No.						
<b>Linebarger Goggan Blair &amp; Simpson PO Box 06152 Chicago, IL 60606</b>		<b>Representing: City of Chicago</b>				<b>Notice Only</b>
Sheet no. <b>25</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>61.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>4447962247797701</b>  <b>Credit One Bank N.A.</b> <b>PO Box 98875</b> <b>Las Vegas, NV 89193</b>		Opened 3/13/14 Last Active 4/01/14 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.				<b>674.00</b>
Account No. <b>3160553</b>  <b>Creditors Collection Bureau, Inc.</b> <b>PO Box 63</b> <b>151 N. Schuyler Avenue</b> <b>Kankakee, IL 60901</b>	-	Opened 8/07/09 Collection on account for and/or acquired from Acute Care Specialists				<b>953.00</b>
Account No. <b>3160553</b>  <b>Creditors Collection Bureau, Inc.</b> <b>PO Box 63</b> <b>151 N. Schuyler Avenue</b> <b>Kankakee, IL 60901</b>	H	Opened 8/07/09 Collection on account for and/or acquired from Acute Care Specialists				<b>953.00</b>
Account No. <b>969505D92215</b>  <b>Dependon Collection Service, Inc.</b> <b>P.O. Box 4833</b> <b>Oak Brook, IL 60522</b>	H	Opened 7/16/10 Collection on account for and/or acquired from Attorney Suburban Radiologists, SC				<b>330.00</b>
Account No. <b>900000320074711</b>  <b>Dept Of Education/NeIn</b> <b>121 S 13th St</b> <b>Lincoln, NE 68508</b>	H	Opened 9/11/12 Last Active 11/01/14 Educational loan				<b>6,000.00</b>
Sheet no. <b>26</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>8,910.00</b>
Subtotal (Total of this page)						<b>8,910.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>900000424396912</b>  <b>Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508</b>	H	<b>Opened 9/30/13 Last Active 11/01/14 Educational loan</b>				<b>5,813.00</b>
Account No. <b>900000320074611</b>  <b>Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508</b>	H	<b>Opened 9/11/12 Last Active 11/01/14 Educational loan</b>				<b>3,500.00</b>
Account No. <b>900000424397012</b>  <b>Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508</b>	H	<b>Opened 9/30/13 Last Active 11/01/14 Educational loan</b>				<b>3,391.00</b>
Account No. <b>900000296179111</b>  <b>Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508</b>	H	<b>Opened 4/17/12 Last Active 11/01/14 Educational loan</b>				<b>3,000.00</b>
Account No. <b>900000469296512</b>  <b>Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508</b>	H	<b>Opened 9/29/14 Last Active 11/01/14 Educational loan</b>				<b>3,000.00</b>
Sheet no. <b>27</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>18,704.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 900000469296412	H	H	Opened 9/29/14 Last Active 11/01/14 Educational loan				2,250.00
Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508							
Account No. 900000296179011	H	H	Opened 4/17/12 Last Active 11/01/14 Educational loan				1,750.00
Dept Of Education/NeIn 121 S 13th St Lincoln, NE 68508							
Account No.	J	J	on or about 2010 Medical services				29.00
Elk Grove Lab Physicians, P.C. 800 Biesterfield Road Elk Grove Village, IL 60007							
Account No.			Representing: Elk Grove Lab Physicians, P.C.				Notice Only
Elk Grove Lab Physicians, P.C. PO Box 77-9154 Dept. 77-9154 Chicago, IL 60678							
Account No.			Representing: Elk Grove Lab Physicians, P.C.				Notice Only
Harvard Collection Services, Inc. 4839 N. Elston Avenue Chicago, IL 60630							
Sheet no. 28 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							4,029.00

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>052-0437196-000</b>	<b>J</b>	<b>on or about 2008 - 2010</b>				<b>2,321.04</b>
<b>First Data Global Leasing</b> <b>PO Box 173845</b> <b>Denver, CO 80217</b>		<b>Claim for balance due on account</b>				
Account No.						
<b>McCarthy, Burgess &amp; Wolff</b> <b>26000 Cannon Road</b> <b>Cleveland, OH 44146</b>		<b>Representing:</b> <b>First Data Global Leasing</b>				<b>Notice Only</b>
Account No. <b>7714210237300314</b>	<b>-</b>	<b>Opened 6/08/03 Last Active 1/01/09</b>				<b>273.87</b>
<b>GE Money Bank / Sam's Club</b> <b>PO Box 981400</b> <b>El Paso, TX 79998</b>		<b>Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>				
Account No.						
<b>Cavalry Portfolio Services, LLC</b> <b>PO Box 27288</b> <b>Tempe, AZ 85285</b>		<b>Representing:</b> <b>GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Account No.						
<b>Cavalry SPV II, LLC</b> <b>c/o Cavalry Portfolio Services, LLC</b> <b>PO Box 27288</b> <b>Tempe, AZ 85285</b>		<b>Representing:</b> <b>GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Sheet no. <b>29</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>2,594.91</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>LTD Financial Services, L.P. 7322 Southwest Freeway, Ste. 1600 Houston, TX 77074</b>		<b>Representing: GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Account No.						
<b>Paragon Way Inc. 2101 W. Ben White Blvd. Austin, TX 78704</b>		<b>Representing: GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Account No.						
<b>Pentagroup Financial, LLC 3065 Union Road Orchard Park, NY 14127</b>		<b>Representing: GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Account No.						
<b>Precision Recovery Analytics, Inc. 7500 Rialto Blvd., Bldg 1, Ste. 100 Austin, TX 78735</b>		<b>Representing: GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Account No.						
<b>Redline Recovery Services, LLC 11675 Rainwater Drive, Ste. 350 Alpharetta, GA 30009</b>		<b>Representing: GE Money Bank / Sam's Club</b>				<b>Notice Only</b>
Sheet no. <u>30</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 6032203480885655		-	Opened 9/26/03 Last Active 12/01/08 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.				720.57
GE Money Bank / Walmart PO Box 981400 El Paso, TX 79998							
Account No.			Representing: GE Money Bank / Walmart				Notice Only
Frontline Asset Strategies, LLC 1935 West County Road, B2 Suite 425 Roseville, MN 55113							
Account No.			Representing: GE Money Bank / Walmart				Notice Only
Greystone Alliance LLC PO Box 1810 Buffalo, NY 14240							
Account No.			Representing: GE Money Bank / Walmart				Notice Only
Greystone Alliance LLC 33 Dodge Road, Ste. 106 Getzville, NY 14068							
Account No.			Representing: GE Money Bank / Walmart				Notice Only
Stellar Recovery Inc. 1327 U.S. Highway 2, West Suite 100 Kalispell, MT 59901							
Sheet no. 31 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							720.57

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Stellar Recovery Inc. 1845 U.S. Highway 93 S, #310 Kalispell, MT 59901</b>			<b>Representing: GE Money Bank / Walmart</b>			<b>Notice Only</b>
Account No.						
<b>Stellar Recovery, Inc. 1845 US Hwy South, Ste. 310 Kalispell, MT 59901</b>			<b>Representing: GE Money Bank / Walmart</b>			<b>Notice Only</b>
Account No.						
<b>Stellar Recovery, Inc. 1327 Highway 2 W, Ste. 100 Kalispell, MT 59901</b>			<b>Representing: GE Money Bank / Walmart</b>			<b>Notice Only</b>
Account No. <b>6008892483683534</b>			<b>Opened 9/19/03 Last Active 3/21/04 Charge Account</b>			
<b>Gemb/Jcp Po Box 984100 El Paso, TX 79998</b>	-					<b>0.00</b>
Account No. <b>3035609</b>			<b>on or about 5/31/2008 Medical services</b>			
<b>Glenoaks Hospital c/o Medical Svcs of Chattanooga Inc 2810 Walker Road Chattanooga, TN 37421</b>	J					<b>1,597.44</b>
Sheet no. <u>32</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,597.44</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>12800791</b>  <b>Harvard Collection Services, Inc.</b> <b>4839 N. Elston Avenue</b> <b>Chicago, IL 60630</b>	<b>W</b>	<b>Opened 9/01/10 Last Active 2/01/10</b> <b>Collection on account for and/or acquired</b> <b>from Elk Grove Lab Physicians, P.C.</b>				<b>29.00</b>
Account No. <b>DAOOS000</b>  <b>Health Medical Imaging, LLC</b> <b>9115 S. Cicero Avenue</b> <b>Oak Lawn, IL 60453</b>	<b>J</b>	<b>on or about 2008</b> <b>Medical services</b>				<b>1,868.75</b>
Account No. <b>4269-3200-0285-2366</b>  <b>HHB / Ameritech</b> <b>PO Box 5253</b> <b>Carol Stream, IL 60197</b>	<b>J</b>	<b>on or about 2007 - 2014</b> <b>Claim for balance due on credit account</b>				<b>1,924.90</b>
Account No.  <b>Blatt, Hasenmiller, Lebsker &amp; Moor</b> <b>125 S. Wacker Drive, Ste.400</b> <b>Chicago, IL 60606</b>		<b>Representing:</b> <b>HHB / Ameritech</b>				<b>Notice Only</b>
Account No.  <b>Portfolio Recovery &amp; Affiliates</b> <b>Portfolio Recovery Associates LLC</b> <b>120 Corporate Blvd., Ste. 1</b> <b>Norfolk, VA 23502</b>		<b>Representing:</b> <b>HHB / Ameritech</b>				<b>Notice Only</b>
Sheet no. <b>33</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>3,822.65</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>			<b>Representing: HHB / Ameritech</b>				<b>Notice Only</b>
Account No.							
<b>Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541</b>			<b>Representing: HHB / Ameritech</b>				<b>Notice Only</b>
Account No.							
<b>Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502</b>			<b>Representing: HHB / Ameritech</b>				<b>Notice Only</b>
Account No. <b>5407915008114842</b>			<b>Opened 6/29/03 Last Active 2/13/06 Credit account</b>				
<b>Hsbc Bank Po Box 5253 Carol Stream, IL 60197</b>		-					<b>0.00</b>
Account No. <b>5408010034716965</b>			<b>Opened 7/24/03 Last Active 12/01/08 Charge Account</b>				
<b>Hsbc Bank Po Box 5253 Carol Stream, IL 60197</b>		-					<b>0.00</b>
Sheet no. <u>34</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>0.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 4269320002852366		H	Opened 9/04/07 Last Active 12/01/08 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.				1,924.90
HSBC Bank PO Box 9 Buffalo, NY 14240							
Account No.			Representing: HSBC Bank				Notice Only
Portfolio Recovery & Affiliates Portfolio Recovery Associates LLC 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502							
Account No.			Representing: HSBC Bank				Notice Only
Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541							
Account No.			Representing: HSBC Bank				Notice Only
Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502							
Account No.			Representing: HSBC Bank				Notice Only
Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541							
Sheet no. 35 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							1,924.90

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>5408010034716965</b>  <b>HSBC Bank</b> <b>PO Box 9</b> <b>Buffalo, NY 14240</b>		<b>Opened 7/24/03 Last Active 12/01/08</b> <b>Misc. credit card purchases for food, clothes,</b> <b>gas, household goods and/or various sundry</b> <b>items.</b>				<b>2,736.00</b>
Account No. <b>4269320002852366</b>  <b>HSBC Bank Nevada, N.A.</b> <b>PO Box 5253</b> <b>Carol Stream, IL 60197</b>		<b>Opened 9/04/07 Last Active 12/01/08</b> <b>Misc. credit card purchases for food, clothes,</b> <b>gas, household goods and/or various sundry</b> <b>items.</b>				<b>1,924.90</b>
Account No.  <b>Portfolio Recovery &amp; Affiliates</b> <b>Portfolio Recovery Associates LLC</b> <b>120 Corporate Blvd., Ste. 1</b> <b>Norfolk, VA 23502</b>		<b>Representing:</b> <b>HSBC Bank Nevada, N.A.</b>				<b>Notice Only</b>
Account No.  <b>Portfolio Recovery Associates, LLC</b> <b>P.O. Box 12914</b> <b>Norfolk, VA 23541</b>		<b>Representing:</b> <b>HSBC Bank Nevada, N.A.</b>				<b>Notice Only</b>
Account No.  <b>Portfolio Recovery Associates, LLC</b> <b>120 Corporate Blvd.</b> <b>Norfolk, VA 23502</b>		<b>Representing:</b> <b>HSBC Bank Nevada, N.A.</b>				<b>Notice Only</b>
Sheet no. <u>36</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>4,660.90</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>		<b>Representing: HSBC Bank Nevada, N.A.</b>				<b>Notice Only</b>
Account No. <b>14443641</b>		<b>Opened 9/14/12 Collection on account for and/or acquired from Illinois Dermatology</b>				<b>220.00</b>
<b>Illinois Collection Service Inc. 8231 185th St., Ste 100 Tinley Park, IL 60487</b>	<b>H</b>					
Account No.						
<b>Illinois Collection Service Inc. P.O. Box 1010 Tinley Park, IL 60477</b>		<b>Representing: Illinois Collection Service Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Illinois Collection Service Inc. PO Box 646 Oak Lawn, IL 60454</b>		<b>Representing: Illinois Collection Service Inc.</b>				<b>Notice Only</b>
Account No.		<b>on or about 2012 Medical services</b>				<b>220.00</b>
<b>Illinois Dermatology Illinois Dermatology Institute LLC 9711 Skokie Blvd. Skokie, IL 60077</b>	<b>J</b>					
Sheet no. <b>37</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>440.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Illinois Collection Service Inc. P.O. Box 1010 Tinley Park, IL 60477</b>		<b>Representing: Illinois Dermatology</b>				<b>Notice Only</b>
Account No.						
<b>Illinois Collection Service Inc. 8231 185th St., Ste 100 Tinley Park, IL 60487</b>		<b>Representing: Illinois Dermatology</b>				<b>Notice Only</b>
Account No.						
<b>Illinois Collection Service Inc. PO Box 646 Oak Lawn, IL 60454</b>		<b>Representing: Illinois Dermatology</b>				<b>Notice Only</b>
Account No. <b>475076212500673</b>		<b>on or about 2007 - 2014 Claim for balance due on credit account</b>				
<b>Integrity Payment Systems, LLC 1700 Higgins Road, Ste. 690 Des Plaines, IL 60018</b>	<b>J</b>					<b>104.30</b>
Account No. <b>3088193443003</b>		<b>Opened 8/06/14 Last Active 5/01/09 Claim for balance due on account for and/or acquired from Santander Consumer USA</b>				
<b>Jefferson Capital Systems 16 Mclelland Road Saint Cloud, MN 56303</b>	<b>H</b>					<b>28,320.87</b>
Sheet no. <u>38</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>28,425.17</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3000016705551000</b>  <b>Main Street Acquisition Corp. PO Box 9201 Old Bethpage, NY 11804</b>	<b>J</b>	<b>on or about 2005 - 2014 Claim for balance due on account for and/or acquired from Citi-Serve Citi Serv Auto Loan</b>				<b>28,320.87</b>
Account No.  <b>Jefferson Capital Systems 16 Mclelland Road Saint Cloud, MN 56303</b>		<b>Representing: Main Street Acquisition Corp.</b>				<b>Notice Only</b>
Account No.  <b>Main Street Acquisition Corp. PO Box 660676 Dallas, TX 75266</b>		<b>Representing: Main Street Acquisition Corp.</b>				<b>Notice Only</b>
Account No.  <b>Praxis Financial Solutions, Inc. 7301 N. Lincoln Avenue, Ste. 220 Lincolnwood, IL 60712</b>		<b>Representing: Main Street Acquisition Corp.</b>				<b>Notice Only</b>
Account No. <b>1594813</b>  <b>MBF Leasing LLC 132 W. 131st Street, 14th Floor New York, NY 10001</b>	<b>H</b>	<b>Opened 10/12/07 Last Active 2/01/08 Claim for balance due on lease agreement</b>				<b>1,705.00</b>
Sheet no. <b>39</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b> <b>30,025.87</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Joseph I. Sussman. P.C. Attorney at Law 132 West 31st Street, Ste. 1320 New York, NY 10001</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No. <b>1595945</b>						
<b>MBF Leasing LLC 132 W. 131st Street, 14th Floor New York, NY 10001</b>	<b>H</b>	<b>Opened 10/17/07 Last Active 1/01/08 Claim for balance due on lease agreement</b>				<b>1,184.00</b>
Account No.						
<b>Joseph I. Sussman. P.C. Attorney at Law 132 West 31st Street, Ste. 1320 New York, NY 10001</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Sheet no. <b>40</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,184.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>MBF Leasing LLC</b> <b>132 W. 131st Street, 14th Floor</b> <b>New York, NY 10001</b>	<b>J</b>	<b>on or about 2007 - 2014</b> <b>Claim for balance due on lease agreement,</b> <b>plus interest and attorney's fees</b>				<b>2,989.73</b>
Account No.						
<b>Joseph I. Sussman. P.C.</b> <b>Attorney at Law</b> <b>132 West 31st Street, Ste. 1320</b> <b>New York, NY 10001</b>		<b>Representing:</b> <b>MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC</b> <b>16W343 83rd St., Ste. D</b> <b>Burr Ridge, IL 60527</b>		<b>Representing:</b> <b>MBF Leasing LLC</b>				<b>Notice Only</b>
Account No. <b>Index No. 064392/08</b>						
<b>MBF Leasing LLC</b> <b>132 W. 131st Street, 14th Floor</b> <b>New York, NY 10001</b>	<b>J</b>	<b>on or about 7/2009</b> <b>Civil judgment entered against Debtor</b> <b>husband for monies owed, plus court costs,</b> <b>atty's fees and statutory interest, in lawsuit</b> <b>filed in Civil Court of City of New York, County</b> <b>of New York, Case No. V06439208NY</b>				<b>1,184.00</b>
Account No.						
<b>Joseph I. Sussman. P.C.</b> <b>Attorney at Law</b> <b>132 West 31st Street, Ste. 1320</b> <b>New York, NY 10001</b>		<b>Representing:</b> <b>MBF Leasing LLC</b>				<b>Notice Only</b>
Sheet no. <b>41</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>4,173.73</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							Notice Only
MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527			Representing: MBF Leasing LLC				
Account No. Index No. 064392/08							2,024.15
MBF Leasing LLC 132 W. 131st Street, 14th Floor New York, NY 10001		J	7/30/2009 Civil judgment entered against Debtor husband for monies owed, plus court costs, atty's fees and statutory interest, in lawsuit filed in Civil Court of City of New York, County of New York, Case No. V06439208NY				
Account No.							Notice Only
Joseph I. Sussman. P.C. Attorney at Law 132 West 31st Street, Ste. 1320 New York, NY 10001			Representing: MBF Leasing LLC				
Account No.							Notice Only
MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527			Representing: MBF Leasing LLC				
Account No. Index No. 064392/08							1,781.15
MBF Leasing LLC 132 W. 131st Street, 14th Floor New York, NY 10001		J	7/30/2009 Civil judgment entered against Debtor husband for monies owed, plus court costs, atty's fees and statutory interest, in lawsuit filed in Civil Court of City of New York, County of New York, Case No. V06439208NY				
Sheet no. <u>42</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							3,805.30



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Joseph I. Sussman. P.C. Attorney at Law 132 West 31st Street, Ste. 1320 New York, NY 10001</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC 132 W. 131st Street, 14th Floor New York, NY 10001</b>		<b>J</b> <b>on or about 2007 - 2014 Claim for balance due on lease agreement, plus interest and attorney's fees</b>				<b>2,740.96</b>
Account No.						
<b>Joseph I. Sussman. P.C. Attorney at Law 132 West 31st Street, Ste. 1320 New York, NY 10001</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Account No.						
<b>MBF Leasing LLC 16W343 83rd St., Ste. D Burr Ridge, IL 60527</b>		<b>Representing: MBF Leasing LLC</b>				<b>Notice Only</b>
Sheet no. <u>43</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>2,740.96</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 8102210126	-	Opened 8/09/10 Collection on account for and/or acquired from Acute Care Specialists				760.00
Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606						
Account No.		Representing: Merchants Credit Guide				Notice Only
Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606						
Account No. 8130740357	H	Opened 3/15/13 Last Active 3/01/10 Collection on account for and/or acquired from Adventist Glenoaks Hospital				2,229.00
Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606						
Account No.		Representing: Merchants Credit Guide				Notice Only
Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606						
Account No. 8102210126	H	Opened 8/09/10 Collection on account for and/or acquired from Acute Care Specialists				760.00
Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606						
Sheet no. 44 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						3,749.00

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Merchants Credit Guide</b>				<b>Notice Only</b>
Account No. <b>8100223204</b>		<b>Opened 1/22/10 Collection on account for and/or acquired from Adventist Glenoaks Hospital</b>				<b>900.00</b>
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>	-					
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Merchants Credit Guide Company</b>				<b>Notice Only</b>
Account No. <b>8083380486</b>		<b>Opened 12/03/08 Collection on account for and/or acquired from Acute Care Specialists</b>				<b>411.00</b>
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>	-					
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>		<b>Representing: Merchants Credit Guide Company</b>				<b>Notice Only</b>
Sheet no. <u>45</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,311.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 8083380487		-	Opened 12/03/08 Collection on account for and/or acquired from Acute Care Specialists			120.00
Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606						
Account No.			Representing: Merchants Credit Guide Company			Notice Only
Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606						
Account No. 8100223204		H	Opened 1/22/10 Collection on account for and/or acquired from Adventist Glenoaks Hospital			900.00
Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606						
Account No.			Representing: Merchants Credit Guide Company			Notice Only
Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606						
Account No. 8083380486		H	Opened 12/03/08 Collection on account for and/or acquired from Acute Care Specialists			411.00
Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606						
Sheet no. 46 of 67 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,431.00

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>			<b>Representing: Merchants Credit Guide Company</b>			<b>Notice Only</b>
Account No. <b>8083380487</b>						
<b>Merchants Credit Guide Company 223 W. Jackson Blvd., Ste. 4 Chicago, IL 60606</b>	<b>H</b>	<b>Opened 12/03/08 Collection on account for and/or acquired from Acute Care Specialists</b>				<b>120.00</b>
Account No.						
<b>Merchants' Credit Guide Company 223 W. Jackson Blvd., #700 Chicago, IL 60606</b>			<b>Representing: Merchants Credit Guide Company</b>			<b>Notice Only</b>
Account No. <b>4120614083135041</b>						
<b>Merrick Bank PO Box 9201 Old Bethpage, NY 11804</b>	<b>H</b>	<b>Opened 5/01/14 Last Active 6/01/14 Misc. credit card purchases for food, clothes, gas, household goods and/or various sundry items.</b>				<b>1,037.00</b>
Account No.						
<b>Merrick Bank PO Box 30537 Tampa, FL 33630</b>			<b>Representing: Merrick Bank</b>			<b>Notice Only</b>
Sheet no. <u>47</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>1,157.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Merrick Bank PO Box 171379 Salt Lake City, UT 84117</b>		<b>Representing: Merrick Bank</b>				<b>Notice Only</b>
Account No. <b>8531411298</b>		<b>Opened 7/22/09 Last Active 12/01/08 Claim for balance due on account for and/or acquired from HSBC Bank Nevada N.A.</b>				<b>2,851.00</b>
<b>Midland Funding LLC Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>	-					
Account No.						
<b>Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. 8875 Aero Drive San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Sheet no. <b>48</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>2,851.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Midland Credit Mgmt., Inc. Department 8870 Los Angeles, CA 90084</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No. <b>8538117905</b>						
<b>Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123</b>	<b>H</b>	<b>Opened 1/04/11 Last Active 10/01/08 Claim for balance due on account for and/or acquired from Chase Bank USA, N.A.</b>				<b>7,927.00</b>
Account No.						
<b>Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Sheet no. <b>49</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>7,927.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Midland Credit Management, Inc. 8875 Aero Drive San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Mgmt., Inc. Department 8870 Los Angeles, CA 90084</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Funding LLC Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No. <b>8531411298</b>						
<b>Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123</b>		<b>H</b> <b>Opened 7/22/09 Last Active 12/01/08 Claim for balance due on account for and/or acquired from Hsbc Bank Nevada N.A.</b>				<b>3,698.00</b>
Account No.						
<b>Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Sheet no. <b>50</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>3,698.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. 8875 Aero Drive San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Mgmt., Inc. Department 8870 Los Angeles, CA 90084</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Funding LLC Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No. <b>Case No. 2013-SR-001230</b>						
<b>Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123</b>		<b>J</b> <b>on or about 7/26/2013 Judgment entered against Debtor husband for monies owed, plus court costs, atty's fees and statutory interest, in lawsuit filed in Circuit Court of Du Page County, Illinois, Case No. 2013-SR-001230</b>				<b>7,094.43</b>
Sheet no. <u>51</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>7,094.43</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. 8875 Aero Drive San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Mgmt., Inc. Department 8870 Los Angeles, CA 90084</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Funding LLC Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Sheet no. <u>52</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>Case No. 2010-SC-006580</b>						
<b>Midland Funding LLC 8875 Aero Drive, Ste. 200 San Diego, CA 92123</b>	<b>J</b>	<b>on or about 12/20/2010 Judgment entered against Debtor husband for monies owed, plus court costs, atty's fees and statutory interest, in lawsuit filed in Circuit Court of Du Page County, Illinois, Case No. 2010-SC-006580</b>				<b>2,736.00</b>
Account No.						
<b>Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Management, Inc. 8875 Aero Drive San Diego, CA 92123</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No.						
<b>Midland Credit Mgmt., Inc. Department 8870 Los Angeles, CA 90084</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Sheet no. <b>53</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>2,736.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Midland Funding LLC Midland Credit Management, Inc. P.O. Box 60578 Los Angeles, CA 90060</b>		<b>Representing: Midland Funding LLC</b>				<b>Notice Only</b>
Account No. <b>7714210237300314</b>		<b>Opened 7/22/09 Collection on account for and/or acquired from GE Money Bank / Sam's Club</b>				<b>273.87</b>
<b>Paragon Way, Inc. 2101 W. Ben White Blvd. Austin, TX 78704</b>		<b>-</b>				
Account No.						
<b>Capital Management Services, LP 726 Exchange Street, Ste. 700 Buffalo, NY 14210</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Cavalry Portfolio Service 7 Skyline Drive, Ste. 3 Hawthorne, NY 10532</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Cavalry Portfolio Service 500 Summit Lake Drive Valhalla, NY 10595</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Sheet no. <b>54</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>273.87</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>J.C. Christensen &amp; Associates P.O. Box 519 Sauk Rapids, MN 56379</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>LTD Financial Services, L.P. 7322 Southwest Freeway, Ste. 1600 Houston, TX 77074</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Pentagroup Financial, LLC 3065 Union Road Orchard Park, NY 14127</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Pentagroup Financial, LLC 5959 Corporate Drive, Ste. 1400 Houston, TX 77036</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Precision Recovery Analytics, Inc. 7500 Rialto Blvd., Bldg 1, Ste. 100 Austin, TX 78735</b>		<b>Representing: Paragon Way, Inc.</b>				<b>Notice Only</b>
Sheet no. <u>55</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>HSBC -69320002852366</b>		-	<b>Opened 12/21/09 Last Active 12/01/08 Collection on account for and/or acquired from Hsbc Bank Nevada N.A.</b>				<b>2,009.00</b>
<b>Portfolio Recovery &amp; Affiliates Portfolio Recovery Associates LLC 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502</b>							
Account No.			<b>Representing: Portfolio Recovery &amp; Affiliates</b>				<b>Notice Only</b>
<b>Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541</b>							
Account No.			<b>Representing: Portfolio Recovery &amp; Affiliates</b>				<b>Notice Only</b>
<b>Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502</b>							
Account No.			<b>Representing: Portfolio Recovery &amp; Affiliates</b>				<b>Notice Only</b>
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>							
Account No. <b>4269-3200-0285-2366</b>		<b>J</b>	<b>on or about 2007 - 2014 Claim for balance due on account for and/or acquired from HSBC Bank Nevada, N.A.</b>				<b>1,993.19</b>
<b>Portfolio Recovery Associates LLC Portfolio Recovery &amp; Affiliates 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502</b>							
Sheet no. <u>56</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							<b>4,002.19</b>
Subtotal (Total of this page)							<b>4,002.19</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502</b>		<b>Representing: Portfolio Recovery Associates LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates LLC</b>				<b>Notice Only</b>
Account No. <b>HSBC -69320002852366</b>		<b>Opened 12/21/09 Last Active 12/01/08 Claim for balance due on account for and/or acquired from HSBC Bank Nevada, N.A.</b>				<b>1,924.90</b>
<b>Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502</b>		<b>H</b>				
Account No.						
<b>Blatt, Hasenmiller, Leibsker &amp; Moor 125 S. Wacker Drive, Ste.400 Chicago, IL 60606</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Sheet no. <u>57</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>1,924.90</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Portfolio Recovery &amp; Affiliates Portfolio Recovery Associates LLC 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No. <b>2594254</b>		<b>on or about 2007 - 2014 Claim for balance due on account for and/or acquired from SBC - Ameritech</b>				<b>1,924.90</b>
<b>Portfolio Recovery Associates, LLC 120 Corporate Blvd. Norfolk, VA 23502</b>	<b>J</b>					
Account No.						
<b>Blatt, Hasenmiller, Leisker &amp; Moor 125 S. Wacker Drive, Ste.400 Chicago, IL 60606</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Sheet no. <u>58</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>1,924.90</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Portfolio Recovery &amp; Affiliates Portfolio Recovery Associates LLC 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC PO Box 12903 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No.						
<b>Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541</b>		<b>Representing: Portfolio Recovery Associates, LLC</b>				<b>Notice Only</b>
Account No. <b>B9361125</b>						
<b>Precision Recovery Analytics, Inc. 7500 Rialto Blvd., Bldg 1, Ste. 100 Austin, TX 78735</b>	<b>J</b>	<b>on or about 2005 - 2014 Claim for balance due on account for and/or acquired from GE Money Bank / Sam's Club</b>				<b>273.87</b>
Account No.						
<b>Capital Management Services, LP 726 Exchange Street, Ste. 700 Buffalo, NY 14210</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Sheet no. <b>59</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>273.87</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>J.C. Christensen &amp; Associates P.O. Box 519 Sauk Rapids, MN 56379</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>LTD Financial Services, L.P. 7322 Southwest Freeway, Ste. 1600 Houston, TX 77074</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Paragon Way Inc. 2101 W. Ben White Blvd. Austin, TX 78704</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Pentagroup Financial, LLC 5959 Corporate Drive, Ste. 1400 Houston, TX 77036</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Pentagroup Financial, LLC 3065 Union Road Orchard Park, NY 14127</b>		<b>Representing: Precision Recovery Analytics, Inc.</b>				<b>Notice Only</b>
Sheet no. <u>60</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Redline Recovery Services, LLC 11675 Rainwater Drive, Ste. 350 Alpharetta, GA 30009</b>			<b>Representing: Precision Recovery Analytics, Inc.</b>			<b>Notice Only</b>
Account No. <b>630070039</b>						
<b>Real Time Resolutions, Inc. 1349 Empire Central Drive, Ste. 150 Dallas, TX 75247</b>		<b>J</b>	<b>on or about 2012 - 2014 Claim for balance due on second mortgage / home equity line of credit</b>			<b>Unknown</b>
Account No.						
<b>Real Time Resolutions, Inc. 1750 Regal Row, Ste. N Dallas, TX 75235</b>			<b>Representing: Real Time Resolutions, Inc.</b>			<b>Notice Only</b>
Account No. <b>3000016705551000</b>						
<b>Santander Consumer USA PO Box 961245 Ft. Worth, TX 76161</b>		<b>H</b>	<b>on or about 2007 - 2012 Claim and/or charge off for balance due on credit account</b>			<b>28,320.87</b>
Account No.						
<b>Jefferson Capital Systems 16 Mclelland Road Saint Cloud, MN 56303</b>			<b>Representing: Santander Consumer USA</b>			<b>Notice Only</b>
Sheet no. <u>61</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>28,320.87</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Santander Consumer USA 8585 N Stemmons Fwy Ste Dallas, TX 75247</b>		<b>Representing: Santander Consumer USA</b>				<b>Notice Only</b>
Account No.						
<b>Santander Consumer USA Attn: Bankruptcy Dept. P.O. Box 560284 Dallas, TX 75356</b>		<b>Representing: Santander Consumer USA</b>				<b>Notice Only</b>
Account No.						
<b>Santander Consumer USA P.O. Box 660633 Dallas, TX 75266</b>		<b>Representing: Santander Consumer USA</b>				<b>Notice Only</b>
Account No.						
<b>Scarlato &amp; Sons 2791 Washington Blvd. Bellwood, IL 60104</b>		<b>Representing: Santander Consumer USA</b>				<b>Notice Only</b>
Account No. <b>479535565</b>		<b>on or about 2007 - 2010 Claim for balance due on telephone service account</b>				<b>270.42</b>
<b>Sprint PO Box 4191 Carol Stream, IL 60197</b>	<b>J</b>					
Sheet no. <b>62</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>270.42</b>
Subtotal (Total of this page)						<b>270.42</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Diversified Adjustment Service, Inc PO Box 32145 Fridley, MN 55432</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No.						
<b>Sprint c/o Afni, Inc. PO Box 3517 Bloomington, IL 61702</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No.						
<b>Sprint 6200 Sprint Parkway Overland Park, KS 66251</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No.						
<b>Sprint PO Box 660075 Dallas, TX 75266</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No.						
<b>Sprint Sprint Customer Service PO Box 8077 London, KY 40742</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Sheet no. <u>63</u> of <u>67</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Sprint c/o I. C. Systems, Inc. P.O. Box 64378 Saint Paul, MN 55164</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No.						
<b>Sprint PO Box 3827 Englewood, CO 80155</b>		<b>Representing: Sprint</b>				<b>Notice Only</b>
Account No. <b>6032203480885655</b>						
<b>Stellar Recovery Inc. 1327 U.S. Highway 2, West Suite 100 Kalispell, MT 59901</b>	<b>J</b>	<b>Claim for balance due on account for and/or acquired from GE Money Bank / Wal-Mart</b>				<b>720.57</b>
Account No.						
<b>Greystone Alliance LLC PO Box 1810 Buffalo, NY 14240</b>		<b>Representing: Stellar Recovery Inc.</b>				<b>Notice Only</b>
Account No.						
<b>Greystone Alliance LLC 33 Dodge Road, Ste. 106 Getzville, NY 14068</b>		<b>Representing: Stellar Recovery Inc.</b>				<b>Notice Only</b>
Sheet no. <b>64</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>720.57</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.  <b>Stellar Recovery Inc.</b> <b>1845 U.S. Highway 93 S, #310</b> <b>Kalispell, MT 59901</b>		<b>Representing:</b> <b>Stellar Recovery Inc.</b>				<b>Notice Only</b>	
Account No.  <b>Stellar Recovery, Inc.</b> <b>1845 US Hwy South, Ste. 310</b> <b>Kalispell, MT 59901</b>		<b>Representing:</b> <b>Stellar Recovery Inc.</b>				<b>Notice Only</b>	
Account No.  <b>Stellar Recovery, Inc.</b> <b>1327 Highway 2 W, Ste. 100</b> <b>Kalispell, MT 59901</b>		<b>Representing:</b> <b>Stellar Recovery Inc.</b>				<b>Notice Only</b>	
Account No. <b>76-12858037</b>  <b>Suburban Radiologists, SC</b> <b>120 N. Oak Street</b> <b>Hinsdale, IL 60521</b>	<b>J</b>	<b>on or about 2010 - 2014</b> <b>Medical services</b>				<b>330.00</b>	
Account No.  <b>Dependon Collection Service, Inc.</b> <b>Attn: Tommy Markie Bruno</b> <b>120 W. 22nd Street</b> <b>Oak Brook, IL 60523</b>		<b>Representing:</b> <b>Suburban Radiologists, SC</b>				<b>Notice Only</b>	
Sheet no. <b>65</b> of <b>67</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)  <b>330.00</b>	

Case No.

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

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B6F (Official Form 6F) (12/07) - Cont.

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						Notice Only
<b>United Collection Bureau, Inc. PO Box 140310 Toledo, OH 43614</b>			<b>Representing: WaMu / Washington Mutual Bank</b>			
Account No.						Notice Only
<b>Washington Mutual PO Box 9001123 Louisville, KY 40290</b>			<b>Representing: WaMu / Washington Mutual Bank</b>			
Account No.						
Account No.						
Account No.						

Sheet no. 67 of 67 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page)

**0.00**

Total  
(Report on Summary of Schedules)

**261,897.08**

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
--	--

In re **OSAMA T. DAOUD,  
KATARZYNA BRONICKA**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 OSAMA T. DAOUD

Debtor 2 KATARZYNA BRONICKA  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 61

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
	<b>Occupation</b>	<u>delivery driver / messenger</u>	
	<b>Employer's name</b>	<u>self-employed</u>	
	<b>Employer's address</b>	<u>2105 Brittany Ct Glendale Heights, IL 60139</u>	
	<b>How long employed there?</b>	<u>3 months</u>	

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
<b>3. Estimate and list monthly overtime pay.</b>	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 **OSAMA T. DAOUD**  
Debtor 2 **KATARZYNA BRONICKA**

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	\$ 0.00	\$ 0.00	4.
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 0.00	5a.
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00	5b.
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ 0.00	5c.
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00	5d.
5e. Insurance	\$ 0.00	\$ 0.00	5e.
5f. Domestic support obligations	\$ 0.00	\$ 0.00	5f.
5g. Union dues	\$ 0.00	\$ 0.00	5g.
5h. Other deductions. Specify: _____	\$ 0.00	\$ 0.00	5h.+
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	\$ 0.00	\$ 0.00	6.
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	\$ 0.00	\$ 0.00	7.
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 2,083.33	\$ 0.00	8a.
8b. Interest and dividends	\$ 0.00	\$ 0.00	8b.
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00	8c.
8d. Unemployment compensation	\$ 0.00	\$ 0.00	8d.
8e. Social Security	\$ 0.00	\$ 0.00	8e.
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <b>SNAP (food stamps) benefits</b>	\$ 364.00	\$ 0.00	8f.
8g. Pension or retirement income	\$ 0.00	\$ 0.00	8g.
8h. Other monthly income. Specify: _____	\$ 0.00	\$ 0.00	8h.+
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 2,447.33	\$ 0.00	9.
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 2,447.33	\$ 0.00	10.
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		+\$ 0.00	11.
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies		\$ 2,447.33	12.
			<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>			
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1 OSAMA T. DAOUD

Debtor 2 KATARZYNA BRONICKA  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number  
(If known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

4 years

- ☐ No
- ☒ Yes

Daughter

6 years

- ☐ No
- ☒ Yes

Daughter

1 1/2 years

- ☐ No
- ☒ Yes

- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 852.58

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$ 0.00

4b. \$ 0.00

4c. \$ 0.00

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 330.00

Debtor 1 **OSAMA T. DAOUD**  
Debtor 2 **KATARZYNA BRONICKA**

Case number (if known) \_\_\_\_\_

<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<u>250.00</u>
6b. Water, sewer, garbage collection	6b. \$	<u>105.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>110.00</u>
6d. Other. Specify: <u>Cable TV &amp; internet service</u>	6d. \$	<u>130.00</u>
<b>7. Food and housekeeping supplies</b>	7. \$	<u>600.00</u>
<b>8. Childcare and children's education costs</b>	8. \$	<u>120.00</u>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<u>150.00</u>
<b>10. Personal care products and services</b>	10. \$	<u>60.00</u>
<b>11. Medical and dental expenses</b>	11. \$	<u>3.75</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>200.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<u>0.00</u>
<b>14. Charitable contributions and religious donations</b>	14. \$	<u>0.00</u>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<u>0.00</u>
15b. Health insurance	15b. \$	<u>0.00</u>
15c. Vehicle insurance	15c. \$	<u>76.00</u>
15d. Other insurance. Specify: _____	15d. \$	<u>0.00</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
	16. \$	<u>0.00</u>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$	<u>0.00</u>
17c. Other. Specify: _____	17c. \$	<u>0.00</u>
17d. Other. Specify: _____	17d. \$	<u>0.00</u>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>		
18. \$		<u>0.00</u>
<b>19. Other payments you make to support others who do not live with you.</b>		
19. \$		<u>0.00</u>
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<u>0.00</u>
20b. Real estate taxes	20b. \$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>
<b>21. Other:</b> Specify: _____	21. +\$	<u>0.00</u>
<b>22. Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.	22. \$	<div style="border: 1px solid black; padding: 2px;"><b>2,987.33</b></div>
<b>23. Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$	<u>2,447.33</u>
23b. Copy your monthly expenses from line 22 above.	23b. -\$	<u>2,987.33</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<div style="border: 1px solid black; padding: 2px;"><b>-540.00</b></div>
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: <div style="border: 1px solid black; width: 750px; height: 20px; display: inline-block;"></div>		

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **OSAMA T. DAOUD**  
**KATARZYNA BRONICKA**

Debtor(s)

Case No.

Chapter

7

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 88 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 31, 2014

Signature /s/ OSAMA T. DAOUD

**OSAMA T. DAOUD**

Debtor

Date December 31, 2014

Signature /s/ KATARZYNA BRONICKA

**KATARZYNA BRONICKA**

Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.



United States Bankruptcy Court  
Northern District of Illinois

In re **OSAMA T. DAOUD  
KATARZYNA BRONICKA**

Debtor(s)

Case No.  
Chapter

**7**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$24,518.00</b>	<b>2013: Debtor Employment Income</b>
<b>\$21,682.00</b>	<b>2012: Both Employment Income</b>
<b>\$25,000.00</b>	<b>2014 YTD: Husband Employment Income</b>

**2. Income other than from employment or operation of business**

None  
☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
--------	--------

B7 (Official Form 7) (04/13)

2

### 3. Payments to creditors

None

☐

**Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>Ocwen Loan Servicing LLC</b> <b>12650 Ingenuity Drive</b> <b>Orlando, FL 32826</b>	<b>October, November &amp; December, 2014</b> <b>(regular monthly first mortgage payments)</b>	<b>\$2,557.74</b>	<b>\$117,892.00</b>

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------------	--	-----------------------

None

☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	-----------------------

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

☐

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>Capital One Bank (USA), N.A. vs. Katarzyna Bronicka</b> <b>Case No. 2014 SR 000832</b>	<b>Debtor wife is the Defendant in a lawsuit claiming monies owed, plus interest and court costs; see Schedule F</b>	<b>Circuit Court of the Eighteenth Judicial Circuit, Du Page County, Illinois</b>	<b>Ex-parte default judgment entered against Debtor on or about June 9, 2014.</b>

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

3

CAPTION OF SUIT  
AND CASE NUMBER

**Midland Funding LLC vs. Osama Daoud**  
**Case No. 2013 SR 001230**

NATURE OF  
PROCEEDING

**Debtor husband**  
**is the Defendant**  
**in a lawsuit**  
**claiming monies**  
**owed, plus**  
**interest and**  
**court costs; see**  
**Schedule F**

COURT OR AGENCY  
AND LOCATION

**Circuit Court of the Eighteenth Judicial**  
**Circuit, Du Page County, Illinois**

STATUS OR  
DISPOSITION

**Ex-parte**  
**default**  
**judgment**  
**entered**  
**against**  
**Debtor on or**  
**about July 26,**  
**2013.**

**Midland Funding LLC vs. Osama Daoud**  
**Case No. 2010 SC 006580**

**Debtor husband**  
**is the Defendant**  
**in a lawsuit**  
**claiming monies**  
**owed, plus**  
**interest and**  
**court costs; see**  
**Schedule F**

**Circuit Court of the Eighteenth Judicial**  
**Circuit, Du Page County, Illinois**

**Ex-parte**  
**default**  
**judgment**  
**entered**  
**against**  
**Debtor on or**  
**about**  
**December 20,**  
**2010.**

None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE  
BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF  
PROPERTY

**5. Repossessions, foreclosures and returns**

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF  
CREDITOR OR SELLER

DATE OF REPOSSESSION,  
FORECLOSURE SALE,  
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF  
PROPERTY

**6. Assignments and receiverships**

None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF  
ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS  
OF CUSTODIAN

NAME AND LOCATION  
OF COURT  
CASE TITLE & NUMBER

DATE OF  
ORDER

DESCRIPTION AND VALUE OF  
PROPERTY

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## 7. Gifts

- None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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## 8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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## 9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Law Offices of Gregory D. Bruno 1807 N. Broadway Melrose Park, IL 60160	11/19/2010, 7/11/2013, 7/12/2014	\$1,500.00 has been paid to date for attorney's fees and filing costs for legal representation in Chapter 7 bankruptcy.

## 10. Other transfers

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
--	------	--

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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### 11. Closed financial accounts

None

- ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
BMO Harris Bank 1335 W. Lake Street Addison, IL 60101	Checking account closed with approximate -\$78.00 negative balance.	on or about October, 2014
BMO Harris Bank 1335 W. Lake Street Addison, IL 60101	Savings account closed with zero balance.	on or about October, 2014

### 12. Safe deposit boxes

None

- ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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### 13. Setoffs

None

- ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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### 14. Property held for another person

None

- ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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### 15. Prior address of debtor

None

- ☒ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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### 16. Spouses and Former Spouses

None

- ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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# **17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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# **18. Nature, location and name of business**

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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# **DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

B7 (Official Form 7) (04/13)

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I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 31, 2014

Signature /s/ OSAMA T. DAOUD  
OSAMA T. DAOUD  
Debtor

Date December 31, 2014

Signature /s/ KATARZYNA BRONICKA  
KATARZYNA BRONICKA  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

B8 (Form 8) (12/08)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **OSAMA T. DAOUD**  
**KATARZYNA BRONICKA**

Debtor(s)

Case No.

Chapter

**7**

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
<b>Creditor's Name:</b> <b>Citi Mortgage Inc</b>	<b>Describe Property Securing Debt:</b> <b>Two bedroom single-family house located at 2105 Brittany Ct., Glendale Heights IL 60139</b>
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>Debtors will attempt to modify loan terms</u> (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	
Property No. 2	
<b>Creditor's Name:</b> <b>Ocwen Loan Servicing LLC</b>	<b>Describe Property Securing Debt:</b> <b>Two bedroom single-family house located at 2105 Brittany Ct., Glendale Heights IL 60139</b>
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>Debtor will retain collateral and continue to make regular payments.</u> (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	



B8 (Form 8) (12/08)

Page 2

Property No. 3	
<b>Creditor's Name:</b> Real Time Resolutions, Inc.	<b>Describe Property Securing Debt:</b> Two bedroom single-family house located at 2105 Brittany Ct., Glendale Heights IL 60139
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>Debtors will attempt to modify loan terms</u> (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	

**PART B** - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b> -NONE-	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date December 31, 2014

Signature /s/ OSAMA T. DAOUD  
OSAMA T. DAOUD  
Debtor

Date December 31, 2014

Signature /s/ KATARZYNA BRONICKA  
KATARZYNA BRONICKA  
Joint Debtor

United States Bankruptcy Court  
Northern District of Illinois

In re **OSAMA T. DAOUD  
KATARZYNA BRONICKA**

Debtor(s)

Case No.

Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u>1,665.00</u>
Prior to the filing of this statement I have received .....	\$	<u>1,165.00</u>
Balance Due .....	\$	<u>500.00</u>

2. \$ 335.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: December 31, 2014

/s/ Gregory D. Bruno

**Gregory D. Bruno  
Law Offices of Gregory D. Bruno  
1807 N. Broadway  
Melrose Park, IL 60160  
(708) 343-4544 Fax: (708) 343-4670**

**AGREEMENT AS TO ATTORNEY'S FEES AND COSTS  
FOR LEGAL REPRESENTATION IN CHAPTER 7 BANKRUPTCY**

This Agreement is made this 14<sup>th</sup> day of AUGUST, 2014, by and between OSAMA T. DAUD (and KATARZYNA BRONICKA), hereinafter referred to as the "Client," and GREGORY D. BRUNO and the Law Offices of GREGORY D. BRUNO, hereinafter referred to as the "Attorney," for legal services to be rendered by the Attorney on behalf of the Client in contemplation of or in connection with a chapter 7 bankruptcy case.

Client and Attorney agree that the minimum fee to be paid by Client to the Attorney for such legal services shall be \$ 2,000.00, which does/~~not~~ <sup>JB</sup> include the bankruptcy filing fee of \$306.00, and which does/~~not~~ <sup>JB</sup> include a credit report fee of \$ 76.00. In this regard, Client agrees to deposit \$ 1,000.00 of the minimum fee as a retainer, prior to the preparation of a bankruptcy petition; and Client further agrees to pay the balance of the minimum fee within 2 MONTHS thereafter. (Attorney hereby acknowledges receipt of the sum of \$ 1,000.00 from Client on 8/14/2014)

In return for the above-disclosed minimum fee, Attorney hereby agrees to render legal services to the Client for all aspects of a chapter 7 bankruptcy, including:

- (1) Analyze the amount and nature of the debts owed by the person filing bankruptcy and determine the best remedy for the person's financial problems.
- (2) Advise the person filing of the relief available under chapter 7 and the other chapters of the Bankruptcy Code, and the advisability of proceeding under each chapter.
- (3) Assist the person in obtaining the required pre-bankruptcy budget and credit counseling briefing.

(4) Assemble the information and data necessary to prepare the chapter 7 bankruptcy forms for filing.

(5) Prepare the petitions, schedules, statements and other chapter 7 forms for filing with the bankruptcy court.

(6) Assist the person filing bankruptcy in arranging his or her assets so as to enable the person to retain as many of the assets as possible after the chapter 7 case is filed.

(7) Filing chapter 7 petitions, schedules, statements and other forms with the bankruptcy court, and, if necessary, notifying certain creditors of the commencement of the bankruptcy case.

(8) If necessary, assisting the person filing bankruptcy in reaffirming certain debts, redeeming personal property, setting aside mortgages or liens against exempt property, and otherwise carrying out the matters set forth in the statement of intention.

(9) Attending the meeting of creditors with the person filing bankruptcy and appearing with the person at any other hearings that may be held in the case.

(10) Assist the debtor in attending and completing the required instructional course on personal financial management.

(11) If necessary, preparing and filing amended schedules, statements, and other documents with the bankruptcy court in order to protect the rights of the person filing bankruptcy.

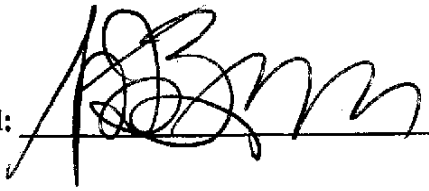
Client hereby acknowledges and agrees that the minimum fee stated in this Agreement may not be sufficient to pay and/or reimburse the Attorney for all of his attorney's fees and costs/expenses, and in that event, the Client agrees to promptly pay any such additional amounts as they become due and owing.


Client also acknowledges and agrees that this Agreement does NOT cover, include or provide for legal representation of Client in other legal matters, including but not limited to: bankruptcy adversary proceedings, issues as to fraudulent conveyances, asset exemptions and/or debt dischargeability, tax proceedings, judicial lien avoidances, relief from stay actions, civil litigation, and criminal investigation and/or prosecution, for which additional fees would need to be agreed upon and pre-paid by the Client in the event that legal representation becomes necessary for those types of legal matters.

Due to a recent decision by the Illinois Supreme Court (Brian Dowling vs. Chicago Options Associates, Inc., Case No. 102578, Ill, 2007), the Attorney proposes to treat all payments made by the Client to the Attorney as an "advance payment retainer" in which the Client intends to make a present payment to the Attorney in exchange for the commitment to provide legal services in the future. Ownership of this retainer passes to

the Attorney immediately upon payment, and shall be deposited in the general office fund account of the Attorney and not in a client trust account, and shall be withdrawn by the Attorney at his sole discretion. While the Client has the option to have such monetary payment placed into a "security retainer" and the choice of the type of retainer to be used is the Client's alone, the Supreme Court has found that the use of an "advance retainer agreement" would be appropriate when a client is facing bankruptcy, a collection action or a criminal forfeiture proceeding and therefore needs to secure and protect sufficient funds out of the reach of seizure in order to hire legal counsel, thereby being advantageous to the client. Your signature on this Agreement shall acknowledge and confirm your acceptance and approval of the use of an "advance payment retainer" by the Attorney.

**The undersigned hereby acknowledges that he or she has read and does accept the foregoing Agreement.**

Signed:  Dated: 8/14/2013

Signed:  OSama David Dated: 8/14/2013

Signed: K. Bmelie Dated: 8/14/2013

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

**Bankruptcy Code.**

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **OSAMA T. DAOUD**  
**KATARZYNA BRONICKA**

Debtor(s)

Case No.

Chapter

**7**

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)**  
**UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**OSAMA T. DAOUD**  
**KATARZYNA BRONICKA**

Printed Name(s) of Debtor(s)

X **/s/ OSAMA T. DAOUD**

Signature of Debtor

**December 31, 2014**

Date

Case No. (if known)

X **/s/ KATARZYNA BRONICKA**

Signature of Joint Debtor (if any)

**December 31, 2014**

Date

**Instructions:** Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.



**United States Bankruptcy Court  
Northern District of Illinois**

In re **OSAMA T. DAOUD  
KATARZYNA BRONICKA**

Debtor(s)

Case No.

Chapter

**7**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: **356**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **December 31, 2014**

**/s/ OSAMA T. DAOUD**

**OSAMA T. DAOUD**

Signature of Debtor

Date: **December 31, 2014**

**/s/ KATARZYNA BRONICKA**

**KATARZYNA BRONICKA**

Signature of Debtor

1st Family Dental of Arlington Hts  
1235 N. Rand Road  
Arlington Heights, IL 60004

Acute Care Specialists II, Ltd.  
701 Winthrop Avenue  
Glendale Heights, IL 60139

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Glendale Heights, IL 60139

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Glendale Heights, IL 60139

Adventist GlenOaks Hospital  
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701 Winthrop Avenue  
Glendale Heights, IL 60139

Adventist GlenOaks Hospital  
33850 Treasury Center  
Chicago, IL 60694

Adventist GlenOaks Hospital  
75 Remittance Drive, Ste. 3125  
Chicago, IL 60675

Adventist GlenOaks Hospital  
33850 Treasury Center  
Chicago, IL 60694

Adventist GlenOaks Hospital  
75 Remittance Drive, Ste. 3125  
Chicago, IL 60675

Adventist GlenOaks Hospital  
33850 Treasury Center  
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Adventist GlenOaks Hospital  
75 Remittance Drive, Ste. 3125  
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33850 Treasury Center  
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ARS National Services, Inc.  
P.O. Box 469047  
Escondido, CA 92046

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AT&T  
Payment Processing Center - 27  
PO Box 55126  
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AT&T  
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Carol Stream, IL 60197

AT&T  
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AT&T Mobility  
PO Box 6416  
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AT&T Mobility  
c/o Afni, Inc.  
P.O. Box 3427  
Bloomington, IL 61702

AT&T Mobility  
c/o CBCS  
PO Box 2589  
Columbus, OH 43216

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PO Box 15311  
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Cap One Na  
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Richmond, VA 23261

Cap One Na  
Po Box 26625  
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Hawthorne, NY 10532

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Hawthorne, NY 10532

Cavalry Portfolio Service  
500 Summit Lake Drive  
Valhalla, NY 10595

Cavalry Portfolio Service  
7 Skyline Drive, Ste. 3  
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Cavalry Portfolio Service  
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Cavalry SPV II, LLC  
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Cavalry Portfolio Services, LLC  
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Cavalry SPV II, LLC  
c/o Cavalry Portfolio Services, LLC  
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Chase  
Po Box 24696  
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Chase / Chase Bank USA, N.A.  
P.O. Box 15298  
Wilmington, DE 19850

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Attn: Bankruptcy Dept.  
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Citi MasterCard  
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Citi-Serv Auto Loan  
c/o Santander Consumer USA  
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Ft. Worth, TX 76161

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Department of Revenue  
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Com Bk Lemont  
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Midland Credit Mgmt., Inc.  
Department 8870  
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